



Kansas Attorney General Derek Schmidt

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POLICY AND PROCEDURE FOR OBTAINING COPIES OF OR ACCESS TO PUBLIC RECORDS PURSUANT TO THE KANSAS OPEN RECORDS ACT- KORA K.S.A. 45-215 ET SEQ.

OFFICE HOURS: 8 A.M. TO 5 P.M., Monday - Friday, except official state holidays. Requests received after 5:00 p.m. will not be logged in and processed until the next business day.

DESIGNATED CUSTODIAN: Lisa A. Mendoza, Assistant Attorney General

ACCESS TO OPINIONS OF THE ATTORNEY GENERAL

Copies of all official Attorney General Opinions are provided to selected media outlets under the direction of the Attorney General's Public Information Officer.

Attorney General Opinions from **1974 and 1989 to the present:** These opinions are published on the internet. You may locate and key-word search the opinions at:

<http://ksag.washburnlaw.edu/>

Attorney General Opinions issued between **1975 and 1988:** The Attorney General is working with the Washburn University School of Law to provide internet access to opinions issued between 1975 and 1988. Until such time, copies of those opinions may be obtained by **calling the Opinion Request/Mail Desk at 785-296-2215.**

An open records request is **NOT** required to obtain copies of Attorney General Opinions.

FEES

One (1) record request in a twelve month period that can be provided with less than one hour of staff time or which is less than 25 pages will be provided at no charge.

For requests exceeding one hour of staff time or that are more than 25 pages, the following rates shall apply:

- **COPIES** will be charged at 25¢ per page for paper copies, \$0.125 per page for electronic copies;
- **MAILING** will be charged at 50¢ for first 5 pages, 25¢ for additional 5 page increments for paper copies; electronic copies may be mailed or transmitted electronically and the cost calculated based on the volume;

- **FAXES** will be charged at 65¢ per 10 page fax;
- **STAFF TIME** will be charged at the rate of pay for each person(s) whose time is used in order to assist and/or respond to a specific request. This may include the time spent to access records maintained on computer facilities, review records to determine whether closure exceptions apply and/or to redact open from closed information. For most requests time will be charged as follows:
 - **Clerical time** will be charged at \$18 per hour;
 - **Assistant Attorney General time** will be charged at \$35 per hour;
 - **Deputy Attorney General time** will be charged at \$50 per hour;
 - **Information Technology (IT) services** will be charged at \$38 per hour; and
 - **Time for other classifications of employees** will be charged based upon actual costs.

Additional fees, including any other costs incurred by the agency in connection with complying with a record request may be assessed to the requestor.

ADVANCE PAYMENT OF FEES REQUIRED

The agency will provide the requestor with an estimate of the fees before gathering and processing or providing access to the records. The estimated fees **MUST be paid BEFORE** the agency processes the request or provides access to the requested records.

While we do our best to provide an accurate estimate of the fee, it is possible that the records can be produced for less than the estimated amount. If so, any additional amounts will be refunded.

However, it is also possible that we will discover the estimated fee is low once the actual processing work is started. If we discover that the estimated fee is too low, we will promptly advise the requestor any correction to the fee, and request advance payment of any additional costs before continuing the work.

Payment may be made by check or money order **payable to the Office of the Attorney General**. Returned checks will incur an additional fee of \$30.00.

WRITTEN REQUEST

To assure that the request is clearly understood, the agency requires requests for access to or copies of records be made in writing. All requests for records must state:

- The requestor's name,
- Mailing address,
- A phone number where the requestor can be contacted, and
- Detailed information about the records being requested. This will help staff in determining if the requested records exist and are in the agency's possession. Requests for records not yet in existence or documents to be created prospectively cannot be honored.

For the convenience of requestors, a form that may be used to make the request is attached at the end of this policy. This form is not required to be used.

FAXING AND AIR EXPRESS DELIVERY

Generally, records may be faxed if the request is for fewer than 15 pages and fax time and facilities are readily available.

If air express delivery is requested, the requestor **MUST** arrange for pick up and packaging of the records; all associated costs for such delivery **MUST** be paid by the requestor.

The agency records custodian has sole discretion as to whether to honor requests for faxing or express delivery.

REQUESTS FOR ELECTRONIC FORMAT RECORDS

The records custodian will be the sole judge of the ability of the agency to comply with any request for the records to be provided in electronic format or for records that must be produced in any special computer generated format.

RESPONSE TIME

The agency will act upon requests as soon as possible, with some response being made to the requestor no later than the third business day following the receipt of the request. If it appears that additional time will be needed, fees will be assessed, or some of the records may be closed by law, a written response will be provided as soon as the records have been located and reviewed.

****This form is being provided to potential requestors as a helpful guide for composing an effective request for public information. Requestors should not consider this form to be mandatory.***

Date

Records Custodian
Kansas Attorney General's Office
Memorial Hall
120 SW 10th Ave., 2nd Floor
Topeka, Kansas 66612-1597

RE: Open Records Request

Dear Records Custodian:

Under the Kansas Open Records Act (KORA), K.S.A. 45-215 *et seq.*, I request access to or copies of the following records (*please be as specific as possible in describing the records you want and the time period your request covers; attach additional pages if necessary*):

I request the information be provided in the following format if possible (please check one):

☐ Paper

☐ Electronic

My contact information is:

Name: _____ Daytime Phone No.: _____

Address: _____
Street Address City State Zip Code

Email Address: _____

I certify that I do not intend to, and will not: (A) Use any list of names or addresses contained in or derived from the records or information for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or (B) sell, give or otherwise make available to any person any list of names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed.

Sincerely,

(Name of Requestor)